

PTO/SB/21 (07-06)

Approved for use through 09/30/2006. GMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL
FORM**
Application Number 10/7014456 09/845149Filing Date 4/30/2001**RECEIVED****CENTRAL FAX CENTER**First Named Inventor John R. BugarinArt Unit 3627JAN 12 2007Examiner Name Ronald Laneau

(to be used for all correspondence after initial filing.)

Total Number of Pages in This Submission 9Attorney Docket Number 35010/126**ENCLOSURES (check all that apply)** Fee Transmittal Form Drawing(s) After Allowance Communication to TC Fee Attached Licensing-related Papers Appeal Communication to Board

of Appeals and Interferences

 Amendment / Reply Petition Appeal Communication to TC

(Appeal Notice, Brief, Reply Brief)

 After Final Petition to Convert to a Proprietary Information Affidavits/declaration(s) Provisional Application Status Letter Extension of Time Request Power of Attorney, Revocation Other Enclosure(s)

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(please identify below):

 Express Abandonment Request Terminal Disclaimer Information Disclosure Statement Request for Refund Certified Copy of Priority Document(s) CD, Number of CD(s) _____ Reply to Missing Parts/ Incomplete Application Landscape Table on CD Reply to Missing Parts under 37 CFR 1.52 or 1.53

Remarks I hereby state that each item of information contained in this Information Disclosure Statement is being filed on or before payment of the Issue Fee pursuant to 37 CFR 1.97(d). I hereby also state that each item of information contained in this Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application not more than 3 months prior to the filing of this statement per 37 CFR 1.97(e)(1). This submission is accompanied by the fee set forth in §1.17(p).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm

The Ollila Law Group LLC

Signature

Printed Name

Curtis J. Ollila

Date

1/12/2007

Reg. No.

47,833

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to (571) 273-8300 the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Amber R. Wolters

Date

1/12/2007

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PTO/SB/08A (07-08)

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Substitute for form 1449A/PTO		CONTINUED FROM FORM 149 10/17/2001	RECEIVED CENTRAL FAX CENTER
INFORMATION DISCLOSURE STATEMENT BY APPLICANT		JAN 12 2007	
(Use as many sheets as necessary)			
Sheet	1	of	1
		Examiner Name	Ronald Laneau
		Attorney Docket Number	35010/126

U.S. PATENT DOCUMENTS

FOREIGN PATENT DOCUMENTS

Examiner Signature _____ **Date Considered** _____

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.¹ Applicant's unique citation designation number (optional).² See Kind Codes of USPTO Patent Documents at www.uspto.gov or MPEP 901.04.³ Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3).⁴ For Japanese patent documents, the indication of the year of the reign of the Emperor must precede the serial number of the patent document.⁵ Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible.⁶ Applicant is to place a check mark here if English language Translation is attached.

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PTO/SB/17 (07-06)

Approved for use through 01/31/2007. OMB 0651-0032

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Effective on 12/08/2004.
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

FEE TRANSMITTAL for FY 2006

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 180.00)

Complete If Known	
Application Number	10/7014166 09/845149
Filing Date	4/30/2001
First Named Inventor	John R. Bugarin
Examiner Name	Ronald Laneau
Art Unit	S627
Attorney Docket No.	35010/126

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JAN 12 2007

METHOD OF PAYMENT (check all that apply)

- Check Credit Card Money Order None Other (please identify) : _____
- Deposit Account Deposit Account Number: _____ Deposit Account Name: _____
- For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)
- | | |
|--|---|
| <input type="checkbox"/> Charge fee(s) indicated below | <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee |
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- Under 37 CFR 1.16 and 1.17

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fees Paid (\$)</u>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description

- Each claim over 20 (including Reissues)
Each independent claim over 3 (including Reissues)
Multiple dependent claims

<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>
	-20 or HP=	x	=			

HP = highest number of total claims paid for, if greater than 20.

<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	<u>Multiple Dependent Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
	- 3 or HP=	x	=			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
_____	- 100 =	/ 50 = (round up to a whole number) x _____ =	_____	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)	01/18/2007 TLUU11 00000002 09845149	Fees Paid (\$)
Other (e.g., late filing surcharge) : International Search Report	01 FC:1806	180.00 UP 180.00

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	47,833	Telephone	(303)938-9999 ext12
Name (Print/Type)	Curtis J. Ollila	Date	1/12/2007		

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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